| Fill in this information to identify the case: | |
|--|--------------------------------------|
| Debtor name ACTION HOME APPLIANCE LIQUIDATION CENTER NEVADA INC. | |
| United States Bankruptcy Court for the: DISTRICT OF NEVADA | |
| Case number (if known) 21-50754 | |
| | ☐ Check if this is an amended filing |

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

| Par | Summary of Assets | | |
|-----|---|------|--------------|
| 1. | Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B) | | |
| | 1a. Real property: Copy line 88 from Schedule A/B | \$_ | 0.00 |
| | 1b. Total personal property: Copy line 91A from <i>Schedule A/B</i> | \$_ | 341,533.72 |
| | 1c. Total of all property: Copy line 92 from <i>Schedule A/B</i> | \$_ | 341,533.72 |
| Par | 2: Summary of Liabilities | | |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D | \$_ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) | | |
| | 3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F | \$_ | 8,461.10 |
| | 3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> | +\$_ | 2,639,785.51 |
| 4. | Total liabilities Lines 2 + 3a + 3b | \$ | 2,648,246.61 |

| Fill in | this in | formation to identify the case: | | | |
|-----------------------------|--|--|--|---|--|
| Debto | r name | ACTION HOME APPLIANCE LIQUID | ATION CENTER NEVADA INC. | | |
| United | States | Bankruptcy Court for the: DISTRICT OF NE | EVADA | | |
| Case r | number | (if known) 21-50754 | | | |
| | | | | | ☐ Check if this is an amended filing |
| | | | | | |
| Offi | cial | Form 206A/B | | | |
| Sch | ned | ule A/B: Assets - Real | and Personal Pro | perty | 12/15 |
| Disclos Include which | se all p all pro have n | property, real and personal, which the debto operty in which the debtor holds rights and o book value, such as fully depreciated ass leases. Also list them on Schedule G: Exec | or owns or in which the debtor has I powers exercisable for the debtor sets or assets that were not capitali | any other legal, equita 's own benefit. Also in zed. In Schedule A/B, | clude assets and properties list any executory contracts |
| the del | otor's r | ete and accurate as possible. If more space name and case number (if known). Also ide eet is attached, include the amounts from t | ntify the form and line number to w | hich the additional inf | |
| sched debto | ule or | rough Part 11, list each asset under the app depreciation schedule, that gives the detail rest, do not deduct the value of secured cla | ls for each asset in a particular cate | egory. List each asset | only once. In valuing the |
| Part 1: | | Cash and cash equivalents ebtor have any cash or cash equivalents? | | | |
| | | to Part 2. | | | |
| | | in the information below. | | | |
| All | cash o | r cash equivalents owned or controlled by | the debtor | | Current value of debtor's interest |
| 3. | | cking, savings, money market, or financial e of institution (bank or brokerage firm) | brokerage accounts (Identify all) Type of account | Last 4 digits of acc | count |
| | 3.1. | BANK OF AMERICA | CHECKING | 8963 | \$20,022.31 |
| | 3.2. | BANK OF AMERICA | SAVINGS | 3096 | \$511.41 |
| 4. | Othe | er cash equivalents (Identify all) | | | |
| 5. | Tota | ıl of Part 1. | | | \$20,533.72 |
| | Add | lines 2 through 4 (including amounts on any a | dditional sheets). Copy the total to line | e 80. | |
| Part 2: | | Deposits and Prepayments | | | |
| 6. Doe s | s the d | ebtor have any deposits or prepayments? | | | |
| | No. Go | to Part 3. | | | |
| | es Fill | in the information below. | | | |
| Part 3: | | Accounts receivable | | | |
| 10. Do | es the | debtor have any accounts receivable? | | | |
| | | to Part 4. | | | |
| | es Fill | in the information below. | | | |
| Part 4: | | nvestments | | | |

| Debtoi | ACTION HOME APPLIA NEVADA INC. Name | NCE LIQUIDATION CE | ENTER Case | number (If known) 21-5075 | 4 |
|----------------|--------------------------------------|-------------------------------------|---|---|------------------------------------|
| 13. Doe | s the debtor own any investme | nts? | | | |
| ■ N | o. Go to Part 5. | | | | |
| ΠY | es Fill in the information below. | | | | |
| Part 5: | Inventory, excluding agric | ulture assets | | | |
| 18. Doe | s the debtor own any inventory | (excluding agriculture a | ssets)? | | |
| ПΝ | o. Go to Part 6. | | | | |
| Y | es Fill in the information below. | | | | |
| | General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
| 19. | Raw materials | | | | |
| 20. | Work in progress | | | | |
| 21. | Finished goods, including goods | ods held for resale 9/01/21 | \$320,000.00 | COST OF GOODS | \$320,000.00 |
| | | | | | |
| 22. | Other inventory or supplies | | | | |
| 23. | Total of Part 5. | | | | \$320,000.00 |
| | Add lines 19 through 22. Copy | the total to line 84. | | | |
| 24. | Is any of the property listed in No | Part 5 perishable? | | | |
| | ☐ Yes | | | | |
| 25. | Has any of the property listed | in Part 5 been purchase | d within 20 days before th | e bankruptcy was filed? | |
| | ■ No | Valuation r | method | Current Value | |
| | ☐ Yes. Book value | | | | |
| 26. | Has any of the property listed ■ No | in Part 5 been appraised | d by a professional within | the last year? | |
| | ☐ Yes | | | | |
| Part 6: | Farming and fishing-relate | ed assets (other than title | ed motor vehicles and land | d) | |
| 27. Doe | s the debtor own or lease any f | arming and fishing-relate | ed assets (other than titled | d motor vehicles and land)? | |
| | o. Go to Part 7. | | | | |
| ПΥ | es Fill in the information below. | | | | |
| Part 7: | Office furniture, fixtures, a | nd equipment; and colle | ectibles | | |
| | s the debtor own or lease any o | | | ? | |
| □и | o. Go to Part 8. | | | | |
| ■ Y | es Fill in the information below. | | | | |
| | General description | | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
| 39. | Office furniture | | | | |
| 40. | Office fixtures | | | | |

| Debtor | ACTION HOME APPLIANCE LIQUIDATION CENTER NEVADA INC. | Case | 21-50754 | |
|-----------------|--|------------------------------------|----------------|------------|
| | SHELVING AND DESKS | \$1,000.00 | COST | \$1,000.00 |
| 41. | Office equipment, including all computer equipment and communication systems equipment and software | | | |
| 42. | Collectibles <i>Examples</i> : Antiques and figurines; paintings, prints, or obooks, pictures, or other art objects; china and crystal; stamp, coin, collections; other collections, memorabilia, or collectibles | other artwork; or baseball card | | |
| 43. | Total of Part 7. | | | \$1,000.00 |
| | Add lines 39 through 42. Copy the total to line 86. | | | |
| 44. | Is a depreciation schedule available for any of the property lister \blacksquare No \square Yes | d in Part 7? | | |
| 45. | Has any of the property listed in Part 7 been appraised by a prof | fessional within | the last year? | |
| | ■ No | | | |
| | □ Yes | | | |
| Part 8: | Machinery, equipment, and vehicles | | | |
| 16. Does | s the debtor own or lease any machinery, equipment, or vehicles? | ? | | |
| ■ No | o. Go to Part 9. | | | |
| | es Fill in the information below. | | | |
| | | | | |
| Part 9: | Real property | | | |
| 54. Does | s the debtor own or lease any real property? | | | |
| ■ No | o. Go to Part 10. | | | |
| □ Ye | es Fill in the information below. | | | |
| | | | | |
| Part 10: | | | | |
| 59. Does | s the debtor have any interests in intangibles or intellectual prope | erty? | | |
| ■ No | o. Go to Part 11. | | | |
| □ Ye | es Fill in the information below. | | | |
| Part 11: | All other assets | | | |
| | s the debtor own any other assets that have not yet been reported de all interests in executory contracts and unexpired leases not previous | | this form. | |
| ■ No | o. Go to Part 12. | | | |
| $\Box \lor$ | on Fill in the information holes. | | | |

Debtor ACTION HOME APPLIANCE LIQUIDATION CENTER NEVADA INC.

Case number (If known) 21-50754

Name

Part 12: Summary

| In Pa | art 12 copy all of the totals from the earlier parts of the form Type of property | Current value of personal property | Current value of real property |
|-------|--|------------------------------------|--------------------------------|
| 80. | Cash, cash equivalents, and financial assets. Copy line 5, Part 1 | \$20,533.72 | |
| 81. | Deposits and prepayments. Copy line 9, Part 2. | \$0.00 | |
| 82. | Accounts receivable. Copy line 12, Part 3. | \$0.00 | |
| 83. | Investments. Copy line 17, Part 4. | \$0.00 | |
| 84. | Inventory. Copy line 23, Part 5. | \$320,000.00 | |
| 85. | Farming and fishing-related assets. Copy line 33, Part 6. | \$0.00 | |
| 86. | Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7. | \$1,000.00 | |
| 87. | Machinery, equipment, and vehicles. Copy line 51, Part 8. | \$0.00 | |
| 88. | Real property. Copy line 56, Part 9 | > | \$0.00 |
| 89. | Intangibles and intellectual property. Copy line 66, Part 10. | \$0.00 | |
| 90. | All other assets. Copy line 78, Part 11. | +\$0.00 | |
| 91. | Total. Add lines 80 through 90 for each column | \$341,533.72 | + 91b. \$0.00 |
| 92. | Total of all property on Schedule A/B. Add lines 91a+91b=92 | | \$341,533.72 |

| Fill in this info | Fill in this information to identify the case: | | | | | | |
|-------------------|--|---------------------------------------|--|---------------------------------------|--|--|--|
| Debtor name | ACTION HOME APP | LIANCE LIQUIDATION CENTER NEVADA INC. | | | | | |
| United States I | Bankruptcy Court for the: | DISTRICT OF NEVADA | | | | | |
| Case number (| (if known) 21-50754 | | | | | | |
| | | | | Check if this is an amended filing | | | |

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

- 1. Do any creditors have claims secured by debtor's property?
 - No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| Fill in this information to identify the case: | | |
|---|--|---|
| | IQUIDATION CENTER NEVADA INC. | |
| | | |
| United States Bankruptcy Court for the: DISTRICT | OF NEVADA | |
| Case number (if known) 21-50754 | | ☐ Check if this is an amended filing |
| Official Form 206E/F | | |
| Schedule E/F: Creditors Who | o Have Unsecured Claims | 12/15 |
| | creditors with PRIORITY unsecured claims and Part 2 for credito | |
| Personal Property (Official Form 206A/B) and on Schedu | ired leases that could result in a claim. Also list executory contractle G: Executory Contracts and Unexpired Leases (Official Form 2 art 1 or Part 2, fill out and attach the Additional Page of that Part in | 06G). Number the entries in Parts 1 and |
| Part 1: List All Creditors with PRIORITY Unse | cured Claims | |
| 1. Do any creditors have priority unsecured claims | s? (See 11 U.S.C. § 507). | |
| ☐ No. Go to Part 2. | | |
| Yes. Go to line 2. | | |
| List in alphabetical order all creditors who have with priority unsecured claims, fill out and attach th | e unsecured claims that are entitled to priority in whole or in part. e Additional Page of Part 1. | If the debtor has more than 3 creditors |
| | | Total claim Priority amount |
| 2.1 Priority creditor's name and mailing address | As of the petition filing date, the claim is: | \$8,461.10 \$0.00 |
| NEVADA DEPARTMENT OF TAXATION Bankrupty Division | Check all that apply. ☐ Contingent ☐ Unliquidated | |
| 4600 Kietzke Lane, Bldg. L, Room 235 | ☐ Disputed | |
| Reno, NV 89502 Date or dates debt was incurred | Basis for the claim: Taxes owing | |
| Last 4 digits of account number 0821,sTax | Is the claim subject to offset? | _ |
| Specify Code subsection of PRIORITY | ■ No | |
| unsecured claim: 11 U.S.C. § 507(a) (<u>8</u>) | Yes | |
| | | |
| Part 2: List All Creditors with NONPRIORITY U | Jnsecured Claims th nonpriority unsecured claims. If the debtor has more than 6 credi | tors with nonpriority unsecured claims fill |
| out and attach the Additional Page of Part 2. | an non-priority and occurred statistics. In the debtor has more than o decar | Amount of claim |
| | | |
| ACS SILVER STATE PLAZA LLC | As of the petition filing date, the claim is: Check all to Contingent | that apply. \$24,635.91 |
| 360 Pine Street, Suite 800 | ☐ Contingent☐ Unliquidated | |
| Beaumont, TX 77701 | ☐ Disputed | |
| Date(s) debt was incurred _ | Basis for the claim: Rent/Lease Payment | |
| Last 4 digits of account number _ | Is the claim subject to offset? ■ No □ Yes | |
| 3.2 Nonpriority creditor's name and mailing addres | As of the petition filing date, the claim is: Check all i | that apply. \$0.00 |
| COX COMMUNICATIONS | ☐ Contingent | |
| McCARTHY, BURGESS & WOLFF | Unliquidated | |
| 26000 CANNON RD. Bedford, OH 44146 | ☐ Disputed | |
| Date(s) debt was incurred | Basis for the claim: Goods/ Services | |
| Last 4 digits of account number | Is the claim subject to offset? ■ No ☐ Yes | |

Official Form 206E/F

| Debtor | ACTION HOME APPLIANCE LIQUIDATION CE NEVADA INC. | ENTER | Case nur | nber (if known) | 21-50754 | | |
|-----------|---|--|----------------------------|---|---|--------------|---------------------------|
| | Nonpriority creditor's name and mailing address MARCUS BETTENCOURT PO BOX 568 Merced, CA 95341 Date(s) debt was incurred | As of the petition fili Contingent Unliquidated Disputed | ing date, the | claim is: Check a | II that apply. | | Unknown |
| | <u>=</u> | Basis for the claim: | Worker's | Comp Claim | 1 | | |
| | ast 4 digits of account number _ | Is the claim subject to | | - | _ | | |
| | Nonpriority creditor's name and mailing address PROLOGIS B800 HOWARD HUGHES PKWY #1250 Las Vegas, NV 89169 Date(s) debt was incurred _ Last 4 digits of account number _ | As of the petition filing Contingent Unliquidated Disputed Basis for the claim: Is the claim subject to | Lease Ar | rearages | II that apply. | | \$126,000.00 |
| | Nonpriority creditor's name and mailing address STEPHANIE BROWN 9350 S.C. MARRON RD APT 2106 Las Vegas, NV 89178 Date(s) debt was incurred Last 4 digits of account number | As of the petition fili Contingent Unliquidated Disputed Basis for the claim: | Sexual H | arassment C | | | Unknown |
| | Nonpriority creditor's name and mailing address J.S. SMALL BUSINESS ADMINISTRATION Processing & Disbursement Center 14925 Kingsport Road Fort Worth, TX 76155 Date(s) debt was incurred _ Last 4 digits of account number _ | As of the petition fili Contingent Unliquidated Disputed Basis for the claim: | Money L | oaned | II that apply. | | \$149,000.00 |
| | Nonpriority creditor's name and mailing address NM RECYCLE AMERICA, LLC c/o Mark G. Simons, Esq. 6490 S. McCarran Blvd Suite F-46 Reno, NV 89509 Date(s) debt was incurred | As of the petition fili Contingent Unliquidated Disputed Basis for the claim: | Judgmer | <u>nt</u> | II that apply. | \$2 | 2,340,149.60 |
| | List Others to Be Notified About Unsecured Claims alphabetical order any others who must be notified for claims sees of claims listed above, and attorneys for unsecured creditors. | | I 2. Examples | of entities that ma | ay be listed are c | ollection ag | encies, |
| If no ot | hers need to be notified for the debts listed in Parts 1 and 2, | do not fill out or sub | mit this page | e. If additional pa | iges are needed | , copy the ı | next page. |
| ľ | Name and mailing address | | | line in Part1 or Part1 or Particular (if any) liste | | | digits of t number, if |
| Part 4: | Total Amounts of the Priority and Nonpriority Unse | cured Claims | | | | - | |
| 5. Add th | e amounts of priority and nonpriority unsecured claims. | | | | | | |
| 5b. Total | claims from Part 1 claims from Part 2 of Parts 1 and 2 5 5a + 5b = 5c. | | 5a. 5b. + 5c. | Total of clai | im amounts 8,461 2,639,785 2,648,2 | 5.51 | |

ACTION HOME APPLIANCE LIQUIDATION CENTER Debtor NEVADA INC.

Case number (if known)

21-50754

Name

| Fill in | this information to identify the case: | : | | |
|---------|--|---|--|--------------------------------------|
| Debtor | name ACTION HOME APPLIA | NCE LIQUIDATION CENT | TER NEVADA INC. | |
| United | States Bankruptcy Court for the: DIS | STRICT OF NEVADA | | |
| Case r | umber (if known) 21-50754 | | | |
| | | | | ☐ Check if this is an amended filing |
| Offic | ial Form 206G | | | |
| Sch | edule G: Executory (| Contracts and U | nexpired Leases | 12/15 |
| Be as o | omplete and accurate as possible. I | f more space is needed, co | py and attach the additional page, nu | ımber the entries consecutively. |
| | es the debtor have any executory control No. Check this box and file this form v | • | s? les. There is nothing else to report on t | his form. |
| | Yes. Fill in all of the information below Form 206A/B). | veven if the contacts of leases | s are listed on <i>Schedule A/B: Assets - H</i> | Real and Personal Property |
| 2. Lis | t all contracts and unexpired lea | ases | State the name and mailing add whom the debtor has an execut lease | - |
| 2.1. | State what the contract or lease is for and the nature of the debtor's interest | LEASE FOR SPARKS, NEVADA RETAIL STORE | | |
| | State the term remaining | APPROX. 20 MONTHS | ACS SILVER STATE PLAZA 350 PINE STREET | |
| | List the contract number of any | , | #800 | |

Beaumont, TX 77701

government contract

| Fill in thi | s information to identify t | he case: | | | | |
|-------------|---|---|----------------------------|------------------------------------|---------------------------------|--|
| Debtor na | ame ACTION HOME A | APPLIANCE LIQUIDATION CENTER NEVADA IN | C. | | | |
| United St | ates Bankruptcy Court for t | ne: DISTRICT OF NEVADA | | | | |
| Case nur | mber (if known) 21-50754 | | | | | |
| | | | | Check if this is an amended filing | | |
| Officia | ol Form 2001 | | | 3 | | |
| | al Form 206H dule H: Your C | odebtors | | | 12/15 | |
| Scrie | dule II. Toul C | ouebiol's | | | 12/13 | |
| | Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page. | | | | | |
| 1. Do | you have any codebtors | ? | | | | |
| □ No. C | heck this box and submit th | is form to the court with the debtor's other schedules. Not | thing else needs to be rep | orted o | n this form. | |
| cred | itors, Schedules D-G. Incl | all of the people or entities who are also liable for an ude all guarantors and co-obligors. In Column 2, identify the codebtor is liable on a debt to more than one creditor | the creditor to whom the d | debt is o | wed and each schedule | |
| | Column 1: Codebtor | | Column 2: Creditor | | | |
| | | | | | | |
| | Name | Mailing Address | Name | | Check all schedules that apply: | |
| 2.1 | KEVIN JACOBSEN | 2851 ALVARADO ST. San Leandro, CA 94577 | WM RECYCLE AMERICA, LLC | | □ D ■ E/F <u>3.7</u> □ G | |
| 2.2 | VIKING COMMODITY INC. | 2851 ALVARADO ST. San Leandro, CA 94577 | WM RECYCLE AMERICA, LLC | | □ D ■ E/F3.7 | |
| | | | | | □ G | |

| Fill | in this information to identify the case: | | | | |
|------|--|---|---|----------------------|---|
| De | otor name ACTION HOME APPLIANCE LIQUIDA | ATION CENTER | NEVADA INC. | | |
| Un | ted States Bankruptcy Court for the: DISTRICT OF NE | VADA | | | |
| Са | 21-50754 | | | | ☐ Check if this is an amended filing |
| | | | | | 3 |
| Of | ficial Form 207 | | | | |
| St | atement of Financial Affairs for N | lon-Individ | uals Filing for Bar | kruptc | y 04/1 |
| | debtor must answer every question. If more space is e the debtor's name and case number (if known). | needed, attach a | separate sheet to this form. | On the top o | f any additional pages, |
| Pa | t 1: Income | | | | |
| 1. | Gross revenue from business | | | | |
| | □ None. | | | | |
| | Identify the beginning and ending dates of the debte which may be a calendar year | or's fiscal year, | Sources of revenue Check all that apply | | Gross revenue (before deductions and exclusions) |
| | From the beginning of the fiscal year to filing date: From 1/01/2021 to Filing Date | | Operating a business | | \$599,000.00 |
| | | | ☐ Other | | |
| | | | | | |
| | For prior year: From 1/01/2020 to 12/31/2020 | | Operating a business | | \$684,000.00 |
| | FIGHT 1/01/2020 to 12/31/2020 | | Other | | |
| | For year before that: | | ■ Operating a business | | \$63,000.00 |
| | From 1/01/2019 to 12/31/2019 | | ☐ Other | | |
| | Non-business revenue Include revenue regardless of whether that revenue is tax and royalties. List each source and the gross revenue for | | • | | oney collected from lawsuits |
| | ■ None. | | | | |
| | | | Description of sources of | f revenue | Gross revenue from each source (before deductions and exclusions) |
| Pa | t 2: List Certain Transfers Made Before Filing for B | Bankruptcy | | | , |
| | Certain payments or transfers to creditors within 90 d List payments or transfersincluding expense reimbursem filing this case unless the aggregate value of all property t and every 3 years after that with respect to cases filed on | nentsto any credit transferred to that o | or, other than regular employe creditor is less than \$6,825. (Th | | |
| | ■ None. | | | | |
| | Creditor's Name and Address | Dates | Total amount of value | Reasons Check all | for payment or transfer that apply |
| | | | | | |

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

| ACTION HOME APPLIANCE LIQUID NEVADA INC. | | | DATION CENTER Case number (| | nown) | 21-50754 | |
|--|-------------------------------------|---|---|---|-----------------|--|---|
| | may b | signed by an insider unless the aggregate be adjusted on 4/01/22 and every 3 years in line 3. <i>Insiders</i> include officers, directo r and their relatives; affiliates of the debto | after that with respect to cars, and anyone in control o | ases filed on or after the date of a f a corporate debtor and their rela | adjus atives | tment.) Do not ir s; general partne | nclude any payments ers of a partnership |
| | ■ N | lone. | | | | | |
| | | der's name and address ationship to debtor | Dates | Total amount of value | R | easons for pay | ment or transfer |
| 5. | List al | ssessions, foreclosures, and returns I property of the debtor that was obtained closure sale, transferred by a deed in lieu | | | | | d by a creditor, sold a |
| | ■ N | lone | | | | | |
| | Cre | ditor's name and address | Describe of the Proper | rty | Date | • | Value of property |
| 6. | Setof List an of the debt. | ny creditor, including a bank or financial in debtor without permission or refused to r | nstitution, that within 90 day make a payment at the deb | ys before filing this case set off o tor's direction from an account of | or other | erwise took anyt debtor because | hing from an account the debtor owed a |
| | Cre | ditor's name and address | Description of the action | on creditor took | | action was | Amount |
| | | Legal Actions or Assignments | | | take | n | |
| 7. | List th | actions, administrative proceedings, to le legal actions, proceedings, investigation capacity—within 1 year before filing this lone. | ns, arbitrations, mediations | | | | debtor was involved |
| | | Case title Case number | Nature of case | Court or agency's name and address | t | Status of ca | se |
| | 7.1. | MARCUS BETTERNCOURT V. ACTION HOME APPLIANCE LIQUIDATION CENTER NEVADA INC. | WORKER'S COMPENSATION CLAIM (NO COVERAGE) | ADMINISTRATIVE | | ■ Pending □ On appe | |
| | 7.2. | STEPHANIE BROWN V. ACTION HOME APPLIANCE LIQUIDATION CENTER NEVADA INC. | SEXUAL HARRSSMENT CLAIM | ADMINISTRATIVE | | Pending On appe | |
| | 7.3. | WASTE MANAGEMENT V. ACTION HOME APPLIANCE LIQUIDATION CENTER NEVADA INC. CV20-01481 | CIVIL- JUDGMENT ENTERED | SECOND JUDICIAL DISTRICT COURT STATE OF NEVADA | | ☐ Pending ☐ On appe | |
| 8. | List a | Inments and receivership ny property in the hands of an assignee for er, custodian, or other court-appointed of | | | his ca | se and any prop | perty in the hands of a |

Official Form 207

| Debtor ACTION HOME APPLIANCE LIQUID NEVADA INC. | | JIDATION CENTER Case nur | nber (if known) 21-50754 | |
|---|--|---|-----------------------------|---------------------------|
| Part 4: | Certain Gifts and Charitable Contribu | utions | | |
| | all gifts or charitable contributions the diffs to that recipient is less than \$1,000 | debtor gave to a recipient within 2 years before | filing this case unless the | aggregate value of |
| = 1 | None | | | |
| | Recipient's name and address | Description of the gifts or contributions | Dates given | Value |
| Part 5: | Certain Losses | | | |
| 10. All lo | esses from fire, theft, or other casualty | within 1 year before filing this case. | | |
| ■ 1 | None | | | |
| | scription of the property lost and w the loss occurred | Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, of tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property). | Dates of loss | Value of property lost |
| of this relief | | of property made by the debtor or person acting on ng attorneys, that the debtor consulted about debt o | | |
| | Who was paid or who received the transfer? Address | If not money, describe any property transfe | erred Dates | Total amount or value |
| 11. | 1. HARRIS LAW PRACTICE LLC 6151 LAKESIDE DRIVE STE 2100 RENO, NV 89511 | | 3/5/2021; 10/28/2021 | \$9,750.00 |
| | Email or website address | | | |
| | Who made the payment, if not debt VIKING COMMODITY, INC. | tor? | | |
| 11. | 2. HARRIS LAW PRACTICE LLC 6151 LAKESIDE DRIVE STE 2100 RENO, NV 89511 | | PENDING | \$5,250.00 |
| | Email or website address | | | |
| | Who made the payment, if not debt VIKING COMMODITY INC. | tor? | | |

12. **Self-settled trusts of which the debtor is a beneficiary**List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

| Debtor | ACTION HOME APPLIANCE LIQUINEVADA INC. | UIDATION CENTER | Case number (if known) | 21-50754 | |
|-----------------------|---|---|-----------------------------|------------------|---|
| ■ N | None. | | | | |
| Na | me of trust or device | Describe any property transfe | rred Dates tr | | Total amount or value |
| List a 2 yea | sfers not already listed on this stateme ny transfers of money or other property outs before the filing of this case to another outright transfers and transfers made as | y sale, trade, or any other means mad person, other than property transferre | ed in the ordinary course o | f business or fi | |
| | None. | | | | |
| | Who received transfer? Address | Description of property transferr payments received or debts paid | | transfer nade | Total amount or value |
| Part 7: | Previous Locations | | | | |
| List a | ious addresses Il previous addresses used by the debtor Does not apply | within 3 years before filing this case a | and the dates the addresse | es were used. | |
| | Address | | | es of occupand | şy . |
| Part 8: | Health Care Bankruptcies | | From | II-10 | |
| Is the | th Care bankruptcies debtor primarily engaged in offering servinosing or treating injury, deformity, or disviding any surgical, psychiatric, drug treat No. Go to Part 9. Yes. Fill in the information below. | sease, or | | | |
| | Facility name and address | Nature of the business operation the debtor provides | n, including type of servi | and | ebtor provides meals housing, number of ents in debtor's care |
| Part 9: | Personally Identifiable Information | | | | |
| 16. Does | the debtor collect and retain personal | lly identifiable information of custor | mers? | | |
| ■ | No. Yes. State the nature of the information | collected and retained | | | |
| 17. With i | in 6 years before filing this case, have tesharing plan made available by the de | any employees of the debtor been p | participants in any ERISA | A, 401(k), 403(l | o), or other pension or |
| ■ | No. Go to Part 10. Yes. Does the debtor serve as plan adm | | | | |
| Part 10: | Certain Financial Accounts, Safe De | posit Boxes, and Storage Units | | | |
| | | | | | |

Official Form 207

| Debtor ACTION HOME APPLIANCE LIQUIDA NEVADA INC. | | | ATION CENTER Case number (if known) 21-50754 | | | | | |
|--|--|--------|--|-------------------------|--------------|---|-------|---|
| Withi move Inclu | ed financial accounts n 1 year before filing this case, were any fired, or transferred? de checking, savings, money market, or otheratives, associations, and other financial ir | er fir | nancial accounts; ce | | | | | |
| ■ 1 | None | | | | | | | |
| | Financial Institution name and Address | | st 4 digits of count number | Type of acco instrument | unt or | Date account was closed, sold, moved, or transferred | | Last balance before closing o transfe |
| | deposit boxes ny safe deposit box or other depository for | secu | rities, cash, or other | valuables the d | ebtor now | has or did have within 1 yea | ar b | efore filing this |
| ■ 1 | None | | | | | | | |
| De | pository institution name and address | | Names of anyone access to it Address | with | Descript | ion of the contents | | Do you still have it? |
| List a | premises storage any property kept in storage units or wareho on the debtor does business. | uses | within 1 year before | e filing this case. | Do not inc | llude facilities that are in a p | oart | of a building in |
| ■ i | None | | | | | | | |
| Fa | cility name and address | | Names of anyone access to it | with | Descript | ion of the contents | | Do you still have it? |
| Port 11 | Property the Debtor Holds or Controls | . The | ot the Debter Dees | Not Own | | | | |
| 21. Prop List a | erty held for another iny property that the debtor holds or control st leased or rented property. | | | | roperty bor | rowed from, being stored fo | or, o | or held in trust. Do |
| Part 12: | Details About Environment Information | n | | | | | | |
| Env | urpose of Part 12, the following definitions a ironmental law means any statute or govern dium affected (air, land, water, or any other | nmer | ntal regulation that c | oncerns pollutio | n, contamir | nation, or hazardous materi | al, ı | regardless of the |
| | means any location, facility, or property, in ed, operated, or utilized. | cludi | ng disposal sites, the | at the debtor no | w owns, op | erates, or utilizes or that the | e de | ebtor formerly |
| | rardous material means anything that an en larly harmful substance. | viron | mental law defines | as hazardous or | toxic, or de | escribes as a pollutant, con | tam | ninant, or a |
| Report a | II notices, releases, and proceedings kn | own | , regardless of whe | en they occurre | d. | | | |
| 22. Has | the debtor been a party in any judicial o | or ad | ministrative procee | eding under an | y environn | nental law? Include settle | me | nts and orders. |
| ■ | No. Yes. Provide details below. | | | | | | | |
| | se title se number | | Court or agency i | name and | Nature o | f the case | | Status of case |

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Best Case Bankruptcy

| Deb | otor | ACTION HOME APPLIANCE LIQUII NEVADA INC. | DATION CENTER | Case ı | Case number (if known) 21-50754 | | | | | |
|--------------|--------|--|--------------------------------|-------------------|---|----------------------|--|--|--|--|
| | ■ | No. Yes. Provide details below. | | | | | | | | |
| | Site | e name and address | Governmental unit nan address | ne and E | Environmental law, if known | Date of notice | | | | |
| 24. l | las t | he debtor notified any governmental uni | t of any release of hazardou | s material? | | | | | | |
| | | No. Yes. Provide details below. | | | | | | | | |
| | Site | e name and address | Governmental unit nan address | ne and E | Environmental law, if known | Date of notice | | | | |
| Par | t 13: | Details About the Debtor's Business o | r Connections to Any Busin | ess | | | | | | |
| I | _ist a | r businesses in which the debtor has or ny business for which the debtor was an ow de this information even if already listed in the lone | ner, partner, member, or othe | rwise a person iı | n control within 6 years before fil | ing this case. | | | | |
| E | Busin | ess name address C | escribe the nature of the bu | [| Employer Identification number Do not include Social Security number Dates business existed | | | | | |
| | 26a. L | s, records, and financial statements List all accountants and bookkeepers who n ☐ None | naintained the debtor's books | and records with | nin 2 years before filing this case | | | | | |
| | Nar | ne and address | | | | e of service m-To | | | | |
| | 26a | 1.1. TERESA COATS 534 A LEWELLING BVLD. San Leandro, CA 94579 | | | | | | | | |
| 2 | | List all firms or individuals who have audited within 2 years before filing this case. | I, compiled, or reviewed debto | r's books of acc | ount and records or prepared a f | inancial statement | | | | |
| | ı | None | | | | | | | | |
| 2 | 26c. L | List all firms or individuals who were in poss | ession of the debtor's books o | f account and re | ecords when this case is filed. | | | | | |
| | ı | None | | | | | | | | |
| | Nar | ne and address | | | any books of account and rec navailable, explain why | ords are | | | | |
| 2 | | List all financial institutions, creditors, and o statement within 2 years before filing this ca | | ile and trade ag | encies, to whom the debtor issue | ed a financial | | | | |
| | ı | None | | | | | | | | |
| | Nar | me and address | | | | | | | | |
| | | tories any inventories of the debtor's property bea | en taken within 2 years before | filing this case? | | | | | | |
| | | No Yes. Give the details about the two most re | ecent inventories. | | | | | | | |
| | | Name of the person who supervised t inventory | he taking of the D | ate of inventor | y The dollar amount and boor other basis) of each in | | | | | |
| | | | | | - | | | | | |

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

Debtor ACTION HOME APPLIANCE LIQUIDATION CENTER Case number (if known) 21-50754 NEVADA INC.

| 28. | List the debtor's officers, | , directors, r | managing me | mbers, ge | neral partners, | members in c | ontrol, con | trolling sharel | nolders, o | r other p | people |
|-----|-----------------------------|----------------|-----------------|------------|-----------------|--------------|-------------|-----------------|------------|-----------|--------|
| | in control of the debtor at | t the time of | f the filing of | this case. | | | | | | | |

| Name | Address | Position and nature of any interest | % of interest, if any | |
|---------------|--|-------------------------------------|-----------------------|--|
| JERRY GREINER | 7828 FOOTHILL KNOLLS Pleasanton, CA 94588 | PRESIDENT/SHAREHOLDER | 10% | |
| Name | Address | Position and nature of any interest | % of interest, if | |
| KYLE JACOBSEN | 9265 W. RUSSELL RD. #A353 Las Vegas, NV 89148 | DIRECTOR/SHAREHOLDER | 15% | |
| Name | Address | Position and nature of any interest | % of interest, if | |
| DAVID BRAY | 1532 HOLBROOK BLUFFS CT. Wellington, NV 89444 | | | |
| Name | Address | Position and nature of any interest | % of interest, if | |
| JAMES CONNORS | 3202 CHABLIS COURT Pleasanton, CA 94566 | DIRECTOR/SHAREHOLDER | 15% | |
| Name | Address | Position and nature of any interest | % of interest, if | |
| PAUL RUPF | 13501 WATER GAP ROAD Williams, OR 97544 | DIRECTOR/SHAREHOLDER | 15% | |

| - | PAUL RUPF | 13501 WATE Williams, OR | R GAP ROAD R 97544 | DIRECTO | R/SHAREHOLDER | 15% |
|---------------|--|----------------------------|---------------------------------|------------------------|------------------------|--------------------------------|
| | ithin 1 year before the filin ntrol of the debtor, or sha | | | | | ners, members in |
| | No Yes. Identify below. | | | | | |
| Wi | nyments, distributions, or within 1 year before filing this ans, credits on loans, stock r | case, did the debtor provi | ide an insider with value | in any form, including | salary, other compens | ation, draws, bonuses, |
| | No Yes. Identify below. | | | | | |
| | Name and address o | f recipient Amou prope | int of money or descrip erty | tion and value of | Dates | Reason for providing the value |
| 31. Wi | ithin 6 years before filing t | nis case, has the debto | r been a member of any | / consolidated group | o for tax purposes? | |
| | No Yes. Identify below. | | | | | |
| Na | me of the parent corporati | on | | Emplo | yer Identification num | ber of the parent |
| 32. Wi | ithin 6 years before filing t | nis case, has the debto | r as an employer been | • | | fund? |
| | No | | | | | |
| | Yes. Identify below. | | | | | |

Name of the pension fund

Employer Identification number of the parent

corporation

| Debtor | ACTION HOME APPLIANCE LIQUIDATI NEVADA INC. | ON CENTER | Case number (if known) | 21-50754 |
|-----------|--|--------------------------------|---------------------------------|---|
| Part 14: | Signature and Declaration | | | |
| conr | RNING Bankruptcy fraud is a serious crime. M nection with a bankruptcy case can result in fines J.S.C. §§ 152, 1341, 1519, and 3571. | | | |
| | we examined the information in this <i>Statement of</i> correct. | Financial Affairs and any atta | chments and have a reasor | nable belief that the information is true |
| I ded | clare under penalty of perjury that the foregoing is | s true and correct. | | |
| Execute | d on November 22, 2021 | | | |
| /s/ Jerr | y Greiner | Jerry Greiner | | _ |
| Signatur | e of individual signing on behalf of the debtor | Printed name | | |
| Position | or relationship to debtor | | | |
| Are addir | tional pages to Statement of Financial Affairs | for Non-Individuals Filing | for Bankruptcy (Official Fo | orm 207) attached? |

☐ Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Nevada

| | District of revada | | | | |
|------|---|---------------------------------------|------------------------|--------------------------------|----------------|
| In | re ACTION HOME APPLIANCE LIQUIDATION CENTER NEVADA INC. | | Case No. | | |
| | Debtor(s) | (| Chapter | | |
| | DISCLOSURE OF COMPENSATION OF AT | TORNEY F | OR DE | CBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in bankrube rendered on behalf of the debtor(s) in contemplation of or in connection with the | uptcy, or agreed t | o be paid | to me, for services re | |
| | For legal services, I have agreed to accept | ф. | | I Fees/Costs | |
| | Prior to the filing of this statement I have received | | | 15,000.00 | |
| | Balance Due | | | Unknown | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ☐ Debtor | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ✓ Debtor | | | | |
| 4. | ✓ I have not agreed to share the above-disclosed compensation with any other p | erson unless they | are mem | bers and associates o | f my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation with a person or percopy of the agreement, together with a list of the names of the people sharing | rsons who are not in the compensat | members ion is atta | or associates of my l ched. | aw firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all a | aspects of the bar | kruptcy c | ase, including: | |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor b. Preparation and filing of any petition, schedules, statement of affairs and plan c. Representation of the debtor at the meeting of creditors and confirmation hearing d. [Other provisions as needed] | which may be red | juired; | - | cruptcy; |
| 6. | By agreement with the debtor(s), the above-disclosed fee does not include the foll | lowing service: | | | |
| | CERTIFICATION | | | | |
| this | I certify that the foregoing is a complete statement of any agreement or arrangemes bankruptcy proceeding. | ent for payment to | me for re | epresentation of the c | lebtor(s) in |
| | NOVEMBER 22, 2021 /s/ Stephen R. | Harris | | | |
| | Date STEPHEN R | . HARRIS | | | |
| | Signature of A HARRIS LAV | ttorney W PRACTICE L | LC | | |
| | 6151 LAKES | SIDE DRIVE | | | |
| | SUITE 2100 Reno, NV 89 |)511 | | | |
| | , | 0 Fax: 775-78 | 6-7764 | | |

steve@harrislawreno.com

Name of law firm